PTO/SB/81 (01-06)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC E Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number 10/580,636 **Application Number** Filing Date November 24, 2004 (Int'l) **POWER OF ATTORNEY** Neil L. ANDERSON First Named Inventor and **CORRESPONDENCE ADDRESS** <u>A MODULAR CATHETER</u> INDICATION FORM Art Unit 3736 Not Yet Assigned **Examiner Name** Attorney Docket No. 559022000300 I hereby revoke all previous powers of attorney given in the above-identified application. I hereby appoint: Practitioners associated with the Customer Number. 25226 Practitioner(s) named below: Registration Number Registration Namo Name Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The address associated with the above-mentioned Customer Number: OR The address associated with Customer Number: OR Firm or Individual Name Address City State Country Telephone Email I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Date 07 Name ANDERSON Telephone Title and Company NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than on e signature is required, see below*.

Client Reference No.: 127944

forms are submitted.

*Total of